Page 1 of 2

## **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10007457-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which

SLOTTED SUBSTRATE AND SLOTTING PROCESS
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the specification of which is attached hereto unless the following box is checked:						
•		as US Ap	-		ication	
			was amended on (if applicable).			
I hereby state that I have reviewed and understood the contents of the above-identified specification including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty disclose all information which is material to patentability as defined in 37 CFR 1.56.						
Foreign Application(s) and/old hereby claim foreign prior inventor(s) certificate listed a filing date before that of	ity benefits below and	under Title 35, United St have also identified below	any foreign application fo	f any foreign applicati or patent or inventor(s	on(s) for patent ) certificate havi	
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED U	NDER 35 U.S.C. 119	
				YES:	NO:	
Provisional Application				YES:	NO:	
I hereby claim the benefit below:	under Title	35, United States Code So	ection 119(e) of any Unite	ed States provisional a	application(s) list	
		ALL LICATION NUMBER	LILING DATE			
insofar as the subject matt manner provided by the fir	er of each st paragrap	of the claims of this applic h of Title 35, United State	cation is not disclosed in t es Code Section 112, l ac	he prior United States knowledge the duty to	s application in <b>t</b> o disclose mater	
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POWER OF ATTORNEY: As a named inventor, I he business in the Patent and Custome  Send Correspondence to HEWLETT-PACKARD Contellectual Property Address of Collins, Colorado  I hereby declare that made on information with the knowledge imprisonment, or bot false statements may	er of each st paragraph the 37, Cod or PCT into the sereby appoint and believed all staten and believed that will h, under jeopardizes	of the claims of this applich of Title 35, United State of Federal Regulations, Senational filing date of this FILING DATE  Int the following attorney of the connected therewith occurred the occurred the following attorney of the fare believed to be a liful false statements Section 1001 of Title occurred the validity of the accurred to the connected the validity of the accurred to the connected the validity of the accurred to the connected the validity of the accurred to the validity of th	sation is not disclosed in the Code Section 112, I accepted in 1.56(a) which occurs application:  STATUS  STAT	he prior United States knowledge the duty turred between the filin (patented/pending/abandone) secute this application one Calls To: uciello are true and that at these statemenade are punishatates Code and the cent issued thereo	application in to disclose matering date of the produced of th	
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(Use Page Two For Additional Inventor(s) Signature(s))

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

**ATTORNEY DOCKET NO. 10007457-1** 

	Full Name of # 2 joint inventor	Eric L. Nikkel		Citizenship: US		
	Residence:	23496 Whitman Place, Ph	ilomath OR 9	97370		
	Post Office Address:	Same as residence				
	Time I Will		1/10	101		
	Inventor's Signature		Date	701		
	Full Name of # 3 joint inventor:	<del> </del>		Citizenship: US		
	Residence:	3864 NW Estaview Place,	Corvallis OR	97330		
	Post Office Address:	Same as residence				
	Inventor's Signature	Maurel	$\frac{b/o}{\text{Date}}$	11/01		
	Full Name of # 4 joint inventor:	Steven D Leith		Citizenship: US		
	Residence:	3370 NW Summerhill Place,	Albany OR	97321		
	Post Office Address:	Same as Residence				
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The state of the s	Inventor's Signature		Date /			
12	Full Name of # 5 joint inventor:			Citizenship:		
	Residence:					
	Post Office Address:					
DOM:	Inventor's Signature		Date			
	Full Name of # 6 joint inventor:			Citizenship:		
	Residence:					
	Post Office Address:					
F	Inventor's Signature		Date			
	Full Name of # 7 joint inventor:			Citizenship:		
	Residence:					
	Post Office Address:					
ī	Inventor's Signature		Date			
	Full Name of # 8 joint inventor:			Citizenship:		
	Residence:					
	Post Office Address:					
	Inventor's Signature		Date			